



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)		(First)	(Middle)	TELEPHONE
KLEMM		RICHARD	L.	263-4556
MAILING ADDRESS (Street)			FAX	
227 U. LAMA ST.			—	
(City)	(State)	(Zip Code)		
KAILUA	HI	96734		
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE	
CAPITOL RELATIONS INC			263-4556	
MAILING ADDRESS (Street)			FAX	
227 U. LAMA ST			—	
(City)	(State)	(Zip Code)		
KAILUA	HI	96734		

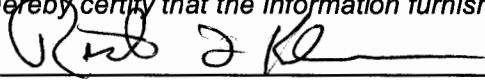
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
HAWAIIAN ALLIANCE FOR RESPONSIBLE TECHNOLOGY & SCIENCE			263-4556
MAILING ADDRESS (Street)			FAX
P.O. Box 1627			—
(City)	(State)	(Zip Code)	
KAILUA	HI	96734	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
RICHARD KLEMM			263-4556
MAILING ADDRESS (Street)			FAX
KAILUA			—
(City)	(State)	(Zip Code)	
KAILUA	HI	96734	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input checked="" type="checkbox"/> Agriculture	Education	Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

2-12-05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
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ROMAN DYEUUS

PRESIDENT

NAME OF ORGANIZATION (if applicable)

TELEPHONE

HAWAIIAN ALLIANCE FOR RESPONSIBLE TECHNOLOGY & SCIENCE

800-358-2213

MAILING ADDRESS (Street)

FAX

PO. Box 1627

(City)

(State)

(Zip Code)

KAILUA

HI

96734

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



2/18/05

(Signature of Authorizing Officer or Person Represented)

(Date)